

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ C C00053553	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee <input type="checkbox"/> Memo Item Starboard Strategic, Inc.		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 10 / 2018	
Mailing Address 705 Melvin Avenue, #105		Amount 33649.43	
City Annapolis	State MD	Zip Code 21401	Transaction ID : 78729567
Purpose of Expenditure Media Buy - Radio		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 09 / 2018
Name of Federal Candidate: Donnelly, Joe, Simon, Sen., Sr.		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <u>IN</u>	
Calendar Year-To-Date Per Election for Office Sought 830829.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input type="checkbox"/> Memo Item Starboard Strategic, Inc.		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 19 / 2018	
Mailing Address 705 Melvin Avenue, #105		Amount 93746.13	
City Annapolis	State MD	Zip Code 21401	Transaction ID : 78782060
Purpose of Expenditure Media Buy - Radio		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 17 / 2018
Name of Federal Candidate: Tester, Jon, , Sen.,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <u>MT</u>	
Calendar Year-To-Date Per Election for Office Sought 123050.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures		127395.56	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Owens, G, , Robert, Signature		Date M M / D D / Y Y Y Y Y Y 10 / 25 / 2018	

[Electronically Filed]